

FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

10/535060

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4		3				
5	1		1			
6		1		1		
7		2				
8		0				
9	1		1			
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TOTAL IND.	3	↓	3	↓		↓
TOTAL DEP.	10	↔	7	↔		↔
TOTAL CLAIMS	13	[REDACTED]	10	[REDACTED]	[REDACTED]	[REDACTED]

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.				↓		↓
TOTAL DEP.			↔		↔	↔
TOTAL CLAIMS		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]

Darrell

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